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Analysis of the Effect of Self-Efficacy, Family Support, and Trust on Patient Control Discipline

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Abstract

The purpose of this study to discuss about analysis of the effect of self-efficacy, family support, and trust on patient control discipline. The design of this study is an observational quantitative study with a cross sectional approach with the focus of the research directed at analyzing the effect of self-efficacy, family support, and trust on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City. The total population of 164 respondents and a sample of 116 respondents were taken by using simple random sampling technique. The analytical method uses multiple linear regression analysis. The research results show that almost half of the respondents had moderate self-efficacy as many as 47 respondents (40.5%). Almost half of the respondents have sufficient family support as many as 47 respondents (40.5%). Almost half of respondents have confidence in drugs in the moderate category as many as 48 respondents (41.4%). Most of the respondents were not disciplined in controlling hypertension in the Prolanis Program as many as 85 respondents (73.3%). Based on the results of multiple linear regression analysis shows that with a p-value of 0.000<0.05 then H1 is accepted so it can be concluded that simultaneously there is an effect of self-efficacy, family support, and trust on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City with the magnitude of the influence is 84.2%.

Keywords
discipline; control; hypertension

I. Introduction

Hypertension is a serious medical condition and can increase your risk of heart, brain, kidney, and other diseases. It is the leading cause of premature death worldwide, with more than 1 in 4 men and 1 in 5 women, more than a billion people having the condition. The burden of hypertension is felt disproportionately in low- and middle-income countries, where two-thirds of cases are found, largely due to increased risk factors in these populations in recent decades.

Hypertension is a major cardiovascular risk factor and a major risk factor for global mortality. 22% of adults aged >18 years worldwide had uncontrolled blood pressure (systolic and diastolic blood pressure 140/90 mmHG) in 2014. Harmful alcohol use, overweight and obesity, physical inactivity, and dietary intake High salt content all contribute to the global incidence of hypertension. If left uncontrolled, hypertension can lead to stroke, myocardial infarction, heart failure, dementia, kidney failure, and blindness. Providing drug therapy and counseling to high-risk people has been identified as one of the most effective measures to prevent heart attacks and strokes.

Data from the World Health Organization in 2015 showed that around 1.13 billion people in the world suffer from hypertension, meaning that 1 in 3 people in the world is diagnosed with hypertension. The number of people with hypertension continues to

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increase every year, it is estimated that by 2025 there will be 1.5 billion people affected by hypertension, and it is estimated that every year 10.44 million people die from hypertension and its complications.

Basic Health Research Data in 2021 stated the prevalence of hypertension based on the results of measurements in the population aged 18 years (34.1%), aged 31-44 years (31.6%), aged 45-54 years (45.3%), 55-64 years (55.2%), the highest case was in South Kalimantan (44.1%), while the lowest was in Papua (22.2%). The estimated number of hypertension cases in Indonesia is 63,309,620 people, while the death rate in Indonesia due to hypertension is 427,218 (0.67%) deaths. The reasons people with hypertension do not take medication include those with hypertension feeling healthy (59.8%), irregular visits to health facilities (31.3%), taking traditional medicine (14.5%), using other therapies (12.5%), forgot to take medicine (11.5%), could not afford to buy medicine (8.1%), there were drug side effects (4.5%) and hypertension medicine was not available at Health Facilities (2%) (Riskesdas, 2014).

Data from the East Java Provincial Health Office in 2021 there are 238,269 people with hypertension. Data from BPJS Kediri in 2021 data on hypertension sufferers of 122,511 people (1,350 controlled hypertension (1.1%) and 121,161 (98.9%) uncontrolled hypertension.

Indiscipline towards medication is one of the biggest public health problems and is considered a major cause of hypertension. Lack of adherence to antihypertensive drugs is the main reason for poor hypertension control. Low discipline towards antihypertensive drugs has also been observed among hypertensive patients, more than half of them do not achieve controlled blood pressure, thus succumbing to disease and reduced quality of life.

The progression of hypertension can be reduced by several factors such as social support, environmental factors, and familiy support. Family support has a positive effect in controlling the disease. Family support will help increase knowledge about hypertension and provide motivation.

Patients who have support from their families show improvement in care than those who do not receive support from their families. Family support can be in the form of information about their illness or reminders to take medication. The impact of uncontrolled blood pressure is to increase the risk of ischemic heart disease fourfold and the risk of cardiovascular damage two to three times.

Family support is also associated with improving blood pressure in sick families in the form of emotional support, appreciation support, instrumental support, and informational support. Specifically, the presence of adequate family support has been shown to be associated with reduced mortality.

Prolanis is a proactive and integrated program that involves participants, health facilities, especially puskesmas and BPJS health which has the aim of encouraging patients with chronic diseases to achieve optimal quality of life. In addition to improving the patient's quality of life, this program is also expected to reduce the risk of complications and utilize costs effectively and rationally. Prolanis consists of activities, namely medical consultation, education, SMS gate-away, home visits, club activities, and monitoring of health status. Based on the results of previous studies, Prolanis in several areas is effective in lowering blood pressure in hypertensive patients.

This program has been implemented and various optimization efforts have been carried out. Pharmacists work with doctors in providing education to patients about hypertension, monitoring patient responses through community pharmacy, adherence to drug and non-drug therapy, detecting and recognizing side-effect reactions early, and preventing and or solving problems related to drug administration.

Based on the results of a preliminary study conducted by researchers on May 17, 2022 at the Salsabila Medika Clinic, Kediri City to 10 respondents, it was found that a number of 7 respondents (70%) had indiscipline in controlling to the nearest health facility where this was due to the respondent's lack of knowledge about how to treat and prevent hypertension, respondents also assume that taking hypertension drugs only when they feel there are complaints and when there are no complaints the respondents stop taking the drug where this is because respondents feel that the drug is not good for continuous consumption, and it is also found that the respondent's family is less support the schedule for taking medication and schedule control to health facilities.

The purpose of this study to discuss about analysis of the effect of self-efficacy, family support, and trust on patient control discipline.

II. Research Method

The design of this study is an observational quantitative study with a cross sectional approach with the focus of the research directed at analyzing the effect of self-efficacy, family support, and trust on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City. In this study, the researcher used an observational quantitative design with a cross sectional approach, which is a study to study the dynamics of the correlation between risk factors and effects, by approaching, observing or collecting data at once (point time approach), meaning that each subject (Octiva et al., 2018; Pandiangan, 2018; Pandiangan, 2022). The study was observed only once and measurements were made on the status of the character or variable of the subject at the time of examination (Asyraini et al., 2022; Octiva, 2018; Pandiangan, 2015). This does not mean that all research subjects are observed at the same time (Jibril et al., 2022; Pandiangan et al., 2018; Pandiangan, 2022).

The total population of 164 respondents and a sample of 116 respondents were taken by using simple random sampling technique. Simple random sampling technique provides a different sampling approach compared to systematic sampling, stratified sampling, or cluster sampling (Octiva et al., 2021; Pandiangan et al., 2021; Pandia et al., 2018).

The analytical method uses multiple linear regression analysis. Multiple linear regression analysis refers to a statistical technique that uses two or more independent variables to predict the outcome of a dependent variable. The technique enables analysts to determine the variation of the model and the relative contribution of each independent variable in the total variance (Pandiangan et al., 2022; Tobing et al., 2018).

III. Result and Discussion

Table 1. Results of Multiple Linear Regression Analysis of Factors that Influence the Discipline Control of Hypertension Patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City which was Held on September 1-15, 2022 with a Total of 116 Respondents

No.	Variable	Sig	B	R^2	Sig
1	(Constant)	0.005	2.268	0.842	0.000
2	Self-Efficacy	0.000	0.883		
3	Family Support	0.001	0.927		
4	Trust	0.004	1.550		

3.1 Partial

1. Effect of Self-Efficacy on Discipline Control

   Based on the results of multiple linear regression analysis shows that the p-value 0.000<0.05 then H_0 is rejected and H_1 is accepted, so it is concluded that partially there is the effect of self-efficacy on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City.

2. Effect of Family Support on Discipline Control

   Based on the results of multiple linear regression analysis shows that the p-value is 0.001<0.05 then H_0 is rejected and H_1 is accepted, so it is concluded that partially there is the effect of family support on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City.

3. Effect of Trust on Discipline Control

   Based on the results of multiple linear regression analysis shows that the p-value is 0.004<0.05 then H_0 is rejected and H_1 is accepted, so it can be concluded that partially there is the effect of trust on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City.

3.2 Simultaneous

Based on the results of multiple linear regression analysis shows that with a p-value of 0.000<0.05 then H_1 is accepted so it can be concluded that simultaneously there is the effect of self-efficacy, family support, and trust on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City, with a magnitude of 84.2%.

3.3 Self-Efficacy of Hypertension Patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City

The results showed that almost half of the respondents had moderate self-efficacy category as many as 47 respondents (40.5%). In addition, 42 respondents (36.2%) have low self-efficacy category. While a number of 27 respondents (23.3%) had a high category of self-efficacy.

Self-efficacy refers to the belief in the extent to which an individual estimates his ability to carry out a task or perform a task needed to achieve a certain result. Confidence in all these abilities includes self-confidence, adaptability, cognitive capacity, intelligence, and capacity to act in stressful situations.

Self-efficacy has effectiveness, namely the individual is able to assess himself as having the power to produce something he wants. The high perceived self-efficacy will motivate individuals cognitively to act appropriately and directed, especially if the goal to be achieved is a clear goal. Self-efficacy is always related and has an impact on the choice of behavior, motivation and individual determination in dealing with every problem. Self-efficacy will develop gradually and continuously, often increasing abilities and increasing related experiences. So it can be concluded that self-efficacy is an individual's belief and stability, estimating existing abilities that produce the behavior that is sought so that the desired goal is achieved.

Self-efficacy produces differences in ways of thinking, feeling and acting. Self-efficacy beliefs affect the choices made and the actions achieved by individuals. Beliefs in self-efficacy also determine how much effort an individual makes, as well as how long the ability to survive in the face of unfavorable situations. Self-efficacy will increase immunity to anxiety, stress and depression and activate biochemical changes that can affect various threatened aspects of immune function.

Individuals who have a high form of self-efficacy, namely having an optimistic attitude, a positive mood can improve health and process information more efficiently, have the thought that hypertension is not something to be ashamed of but instead motivates themselves to want to seek treatment with discipline, while individuals have self-efficacy low, namely having a pessimistic attitude, a negative mood increases the likelihood of a person becoming angry, feeling sad, and not wanting to recover from an illness or even ignoring the pain.

3.4 Family Support of Hypertension Patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City

The results showed that almost half of the respondents had sufficient family support as many as 47 respondents (40.5%). In addition, 41 respondents (35.3%) had family support in the category of less. Meanwhile, a number of 28 respondents (24.1%) had family support in the good category.

Family support is the attitude, action and acceptance of the family towards its members. Family members are seen as an inseparable part of the family environment. The family also functions as a support system for its members and family members view that people who are supportive are always ready to provide help with assistance if needed.

Family support as a process of the relationship between the family and the social environment. Family support is verbal and non-verbal communication, advice, real help or behavior provided by people who are familiar with the subject in their social environment or in the form of presence and things that can provide emotional benefits or influence on the behavior of the recipient, in this case the person who feels emotionally supported feels relieved because he is noticed, gets advice or a pleasant impression on him.

Family and community support has a big role in improving medication adherence, namely by monitoring and providing encouragement to sufferers. The advantage of the family as PMO is that they live in the same house as the sufferer so that the monitoring is more optimal and there is no need for direct transportation costs. Patients and their families are aware of the importance of adherence to treatment and often sufferers want to immediately complete treatment so that the community sees themselves as recovering so that they can be accepted back into the community.

Families have four types of support, namely: informational support, assessment, instrumental and emotional support. Patients with hypertension really need the four types of support that come from the family so that they can improve medication adherence and speed up the healing process.

The stage of development affects family support, meaning that support can be determined by the age factor, in this case growth and development, thus each age range (infant-elderly) has a different understanding and response to health changes. Children have a higher level of compliance than adolescents even though children have less information. For elderly patients, adherence to medication can be affected by reduced memory, plus if elderly patients live alone. Adherence to medication rules in children, adolescents and adults is the same.

In patients with hypertension, family support is considered an important determinant of health behavior. Family support that a person needs can be in the form of moral, emotional and intimate support as well as the need for information and feedback. This can be catered for by the family. The power of family support influences individual self-care behavior through increasing motivation, providing information and providing feedback.

The family has an important role in a person's life as well as with hypertension sufferers in the prolanis program. With family support, people with hypertension will feel

more meaningful and have the spirit to be able to recover from their illness. Based on the results of the study, it was found that there were still many patients with hypertension in the prolanis program who did not get family support. Families should be able to provide encouragement, input and remind to take medicine that the purpose of taking medicine is for the patient's recovery.

3.5 Trust of Hypertension Patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City

The results showed that almost half of the respondents had confidence in the drug in the moderate category as many as 48 respondents (41.4%). In addition, a number of 40 respondents (34.5%) have confidence in the drug in the low category. While a number of 28 respondents (24.1%) have confidence in the drug in the high category.

Trust is all knowledge possessed by consumers and all conclusions made by consumers about objects, attributes and benefits. Trust is a psychological area which is a concern for accepting what is based on expectations of good behavior from others.

Trust is the belief of one party in the reliability, durability, and integrity of the other party in the relationship and the belief that his actions are in the best interest and will produce positive results for the trusted party. Trust is an assessment of one's relationship with other people who will carry out certain transactions in accordance with expectations in an environment full of uncertainty.

Behavioral beliefs about therapy are influenced by beliefs about illness and treatment, forgetting to take medication, side effects of medication, complexity of treatment, lack of knowledge about the disease and its treatment, financial difficulties, psychological, social/family support, quality of relationship between patient and doctor and poor quality of life. Trust in treatment can be seen from the patient's diligent in taking medication according to schedule, taking medication every day, and running out of medication on time. The assessment of treatment confidence can also be seen in the patient's self-report, the number of drugs, pharmacy records where the patient always takes the treatment recommended by health workers well.

Trust becomes a hope held by an individual when the words, promises, oral or written statements of an individual or other group can be realized. Where the things that are said by health workers can be believed by hypertensive patients and believe in all their recommendations to be done by patients. So that hypertensive patients in the prolanis program can take drugs at their own will, not under coercion. Based on the results of the study, it was found that many hypertensive patients in the prolanis program had low confidence in drugs which was due to lack of knowledge of the benefits of drugs and also due to poor perceptions of health workers.

IV. Conclusion

The research results show that almost half of the respondents had moderate self-efficacy as many as 47 respondents (40.5%). Almost half of the respondents have sufficient family support as many as 47 respondents (40.5%). Almost half of respondents have confidence in drugs in the moderate category as many as 48 respondents (41.4%). Most of the respondents were not disciplined in controlling hypertension in the Prolanis Program as many as 85 respondents (73.3%). Based on the results of multiple linear regression analysis shows that with a p-value of 0.000<0.05 then H1 is accepted so it can be concluded that simultaneously there is an effect of self-efficacy, family support, and

trust on discipline control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City with the magnitude of the influence is 84.2%.

The following suggestions for this research are:

1. For Respondents

   It is hoped that hypertensive patients will be able to discipline themselves to control and follow the Prolanis Program on a regular basis and at the same time regularly consume drugs given by health workers, which drugs should be consumed until they run out according to schedule.

2. For Educational Institutions

   It is hoped that educational institutions can use the results of this study as learning input in the analysis of factors that influence the discipline of controlling hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City and can be developed again for further research to be more useful for readers and for researchers.

3. For Further Researchers

   It is hoped that further research needs to be deepened and added more specific research on factors that affect the routine control of hypertension patients in the Prolanis Program at the Salsabila Medika Clinic, Kediri City.

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